PART B - FEE(S) TRANSMITTAL

d this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(571) 273-2885

NATRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further borrespondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicate unless controlled below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance address.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

09/14/2005

TAROLLI, SUNDHEIM, COVELL & TUMMINO L.L.P. **SUITE 1111 526 SUPERIOR AVENUE** CLEVELAND, OH 44114-1400

12/16/2005 SFELEKE2 00000135 10786788

01 FC:2501 02 FC:1504 700.00 OP

300.00 DP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Richard Kline	(Depositor's name)
Jin the	(Signature)
13 12/14/05	(Date)

.L.P

ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE CCF-6448NP 3699 10/786,788 02/25/2004 Jose L Navia

TITLE OF INVENTION: APPARATUS AND METHOD FOR AUTO-RETROPERFUSION OF A CORONARY VEIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		. \$300	\$1000	12/14/2005	
EXA	MINER	ART UN	IIT	CLASS-SUBCLASS]		
BIANCO	, PATRICIA	3761		604-008000			
CFR 1.363). Change of correspor Address form PTO/SB/ "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required.	ce address or indication of "F ndence address (or Change of 122) attached. ation (or "Fee Address" Indic or more recent) attached. Us	Correspondence ation form e of a Customer	(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, li nmes of up to 3 registered pater OR, alternatively, ome of a single firm (having as a lattorney or agent) and the name ed patent attorneys or agents. If name will be printed.	a member a les of up to	li, Sundheim l.& Tummino	
	D RESIDENCE DATA TO B			T (print or type) pear on the patent. If an assign for filing an assignment.	nee is identified below, the	document has been filed for	
Cleveland Clinic Foundation			B) RESIDENCE: (CITY and STATE OR COUNTRY) Cleveland, Ohio				
Please check the appropria 4a. The following fee(s) are			inted on the p	patent): Individual XXC	orporation or other private gr	oup entity Government	
Issue Fee	e encioseu:	40	•	in the amount of the fee(s) is er	aclosed.		
	small entity discount permitte		Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # o	of Copies		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0090 (enclose an extra copy of this form).				
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	3.1	cant is no longer claiming SMA			
NOTE: The Issue Fee and interest as shown by the re-	Publication Fee (if required) cords of the United States Pat	will not be accepted ent and Trademark	d from anyon Office.	ny) or to re-apply any previous le other than the applicant; a reg	istered attorney or agent; or t	he assignee or other party in	
Authorized Signature	James LT	woll	1	Date	12/14	/05	
Typed or printed name	James L. '	Tarolli		Registration	No. 36,029		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.